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PTO/SB/21 (09-04)
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## **TRANSMITTAL FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 18 + 6 references

	<u> </u>					
Application Number	10/781,203					
Filing Date	February 18, 2004					
First Named Inventor	Hirokazu YAMASAKI, et al.					
Art Unit	2837					
Examiner Name	Rita Leykin					
Attorney Docket No.	MAT-8507US					

Date

June 1, 2005

ENCLOSURES (Check all that apply)									
<b>X</b>	Fee Transmittal Form  Credit Card Payment Form Attached		Drawing(s) Licensing-related Papers		After Allowance Communication to TC Appeal Communication to				
	Amendment/Reply After Final Affidavits/Declaration(s)  Extension of Time Request		Petition  Petition to Convert to a Provisional Application  Power of Attorney, Revocation, Change of Correspondence		Board of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)				
	Express Abandonment Request		Address Terminal Disclaimer		Proprietary Information Status Letter				
Ø	Information Disclosure Statement  Certified Copy of Priority  Document(s)		Request for Refund  CD, Number of CD(s)  Landscape Table on CD		Other Enclosure(s) (please identify below):  > Return postcard; > PTO Form 1449 > 6 references				
Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53			Remarks:						
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Signature Runciu Cluby Printed Name Lawrence E. Ashery									
Date	June 1, 2005		Reg. No.	34	4,515				
CERTIFICATE OF TRANSMISSION/MAILING									
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Effe	ective on 12/08/04.		Complete if Known									
Fees pursuant to the Consolid	Application Number 10/7		/781,203	781,203								
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UN 0 3 2005 🖏 For	First Named In	nventor Hi	rokazu YAMASA	kazu YAMASAKI, et al.								
Applicant claims small	l entity status. See	37 CFR 1.27	Examiner Name Rita		ta Leykin	Leykin						
		<del></del>	Art Unit 2837			•						
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FEE CALCULATION	<del></del>											
1. BASIC FILING, SEA	ARCH, AND EXAM	NATION FEES	- <u>-</u>									
	FILING FEES	S SEARC	H FEES	EXAMIN	ATION FEES							
	Small E		Small Entity		Small Entity							
Application Type	Fee (\$) Fee		Fee (\$)	Fee (\$)		Fees Paid (\$)						
Utility	300 150		250 50	200 130	100 65							
Design	200 100 200 100	-	150	160	80							
Plant Reissue	300 150		250	600	300							
Provisional			0	0	0							
2. EXCESS CLAIM FEES  Fee Description  Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  52 - 53 or HP =												
SUBMITTED BY	IN. Cade			<del></del>		plete (if applicable)						
Signature Uo	ney/Agent) 2:	7,424	Telephone	(610) 407-0700								
Name (Print/Type) Daniel	l N. Calder				Date	June 1, 2005						

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